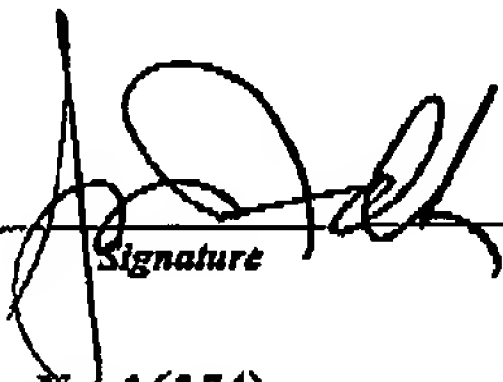


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. APP 1237
Applicant(s): Thomas Clyde Banwell			
Serial No. 09/771,313	Filing Date 01/27/2001	Examiner Stevens, Roberta A	Group Art Unit 2665
Invention: Physical Layer Auto-Discovery for Management of Network Elements			RECEIVED CENTRAL FAX CENTER NOV 03 2004
<p>I hereby certify that this <u>Reply to Office Action of 08/03/2004</u> (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>)</p> <p>on <u>11/03/2004</u> (Date)</p> <p><u>Michelle Masseau</u> (Typed or Printed Name of Person Signing Certificate)</p> <p><u>Michelle Masseau</u> (Signature)</p>			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. APP 1237	
Applicant(s): Thomas Clyde Banwell					
Serial No. 09/771,313	Filing Date 01/27/2001	Examiner Stevens, Roberta A	Group Art Unit 2665		
Invention: Physical Layer Auto-Discovery for Management of Network Elements					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	8 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"><div><p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p><p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p><p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p><p><input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account</p><p><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p><p><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p></div><div style="text-align: right;"><p>Dated: 11/03/2004</p></div></div> <div style="margin-top: 20px;"><div style="display: flex; align-items: center;"><div style="flex: 1;"> <small>Signature</small></div><div style="flex: 1; border: 1px solid black; padding: 5px; margin-left: 20px;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align: center; margin-top: 10px;"><i>Signature of Person Mailing Correspondence</i></p><p style="text-align: center; margin-top: 10px;"><i>Typed or Printed Name of Person Mailing Correspondence</i></p></div></div><div style="margin-top: 20px;"><p>James W. Falk (Reg. No. 16154) Telcordia Technologies, Inc. One Telcordia Drive 5G116 Piscataway, NJ 08854-4157</p></div></div> <div style="margin-top: 20px;"><p>CC:</p></div>					